

Urban District of Stanley



ANNUAL REPORT

of the

Medical Officer of Health

(A. L. TAYLOR, M.D., Ch.B., D.P.H.)

and the

Public Health Inspector

(D. WALKER, Cert. R.S.H., A.R.S.H., M.A.P.H.I.)

1962



WAKEFIELD

W. H. MILNES (SUCCS.) LTD.

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STANLEY URBAN DISTRICT COUNCIL

* * *

Chairman of the Council:

Councillor F. Lumb, J.P.

Vice-Chairman:

Councillor J. E. Howe, B.E.M., J.P.

* * *

Public Health Committee:

Chairman : Councillor H. Britton.

Councillor J. E. Howe, B.E.M.

Councillor J. E. Furness.

Councillor H. Elson.

Councillor G. H. Hatton.

Councillor F. Lumb.

Councillor R. E. Maw.

PUBLIC HEALTH OFFICERS

MEDICAL OFFICER OF HEALTH (Part-time) :—

Dr. A. L. Taylor, M.D., D.P.H.

SENIOR PUBLIC HEALTH INSPECTOR:—

D. Walker, Cert. R.S.H., A.R.S.H., M.A.P.H.I.,
Certified Inspector of Meat and Other Foods.

ADDITIONAL PUBLIC HEALTH INSPECTOR:—

N. Buckle, Cert. R.S.H., A.R.S.H., M.A.P.H.I.,
Certified Inspector of Meat and Other Foods.
(To 19.10.62).

T. Howard, R.S.H., M.R.S.H., M.A.P.H.I.
(From 1.11.62).

PUPIL PUBLIC HEALTH INSPECTOR:—

D. Powers.

CLERK:—

Mrs. Wood.

STANLEY URBAN DISTRICT COUNCIL

ANNUAL REPORT

OF THE

Medical Officer of Health, 1962

To the Chairman and Members of the
Stanley Urban District Council.

Mr. Chairman and Gentlemen,

In presenting my Report for 1962 I am glad to tell you at the outset that you will find the Report satisfactory in almost every respect. The Birth Rate continues to rise and the general level of community prosperity has been maintained, and even enhanced, during the year.

Tuberculosis continued to display the improvement of recent years and new cases are negligible.

At the time of writing, the Mental Welfare Training Centre has been completed and taken over, and is to be opened in the very near future. The Mental Health Service in general is gradually taking its permanent shape and later in the Report I will include comments by the Senior Mental Welfare Officer.

No major change in the administrative machine of the Public Health Service in your area has been made, and relationships with yourselves, with colleagues in surrounding areas, and with other branches of the social services, have remained excellent. It is a pleasure to express my thanks to yourselves and to the Clerk and Senior officials of the Council for the many kindnesses which I have received at your hands during the year.

I hope that your perusal of my Report will act as a stimulus to your interest, and that you will find that the facts and figures related therein show a satisfactory picture of public health and well-being in your area.

I remain, Gentlemen,

Yours faithfully,

A. L. TAYLOR,
Medical Officer of Health.

STANLEY URBAN DISTRICT COUNCIL

STATISTICAL MEMORANDA FOR 1962

Area in Acres	...	...	...	5,169
Registrar General's Estimate of Population for 1962				17,200
Number of Inhabited Houses, 1962, according to Rate Book	...	...	...	5,873
Rateable Value, Year commencing 1.4.62	...			£128,711
Net Product of a Penny Rate, Year commencing 1.4.62				£497

VITAL STATISTICS IN 1962

				M.	F.	Total
Live Births.						
Legitimate	...	...	...	158	129	287
Illegitimate	...	...	...	8	2	10
Total				166	131	297

Live Birth Rate per 1,000 population (adjusted) 16·92

Still Births.

Legitimate	...	...	...	1	2	3
Illegitimate	...	...	...	—	—	—
Total				1	2	3

Still Birth Rate per 1,000 live and still births 10·0

Birth Rate (live and still) per 1,000 of the estimated resident population (adjusted) 17·09

Deaths.

				M.	F.	Total
All Ages	...	...	...	111	100	211
Death Rate per 1,000 of the estimated resident population (adjusted)					15·21	

	M.	F.	Total
Deaths of Infants under 1 year ...	5	1	6
Death Rate of Infants under 1 year :—			
All Infants per 1,000 live births ...			20·20
Legitimate Infants per 1,000 legitimate live births ...			20·91
Illegitimate Infants per 1,000 illegitimate live births ...			0·0
Neo-natal Mortality Rate per 1,000 live births			16·83
Illegitimate live births per cent. of total live births			3·37
Deaths from Diarrhoea (under 2 years of age)			0
Rate per 1,000 population ...	...		0·0
Rate per 1,000 live births ...	...		0·0
Deaths from Measles (all ages) ...	...		0
Deaths from Whooping Cough (all ages) ...	...		0
Deaths from Cancer (all ages) ...	...		42

Maternal Mortality.

Deaths ...	...	0
Rate per 1,000 (live and still) births	...	0·0

RECORD OF DEATHS IN AGE GROUPS, 1962

Age				Males	Females	Total
Under 1 year	...			5	1	6
1—5 years	...	...		2	—	2
5—10	„	...	...	—	2	2
10—15	„	...	...	—	—	—
15—20	„	...	...	3	—	3
20—25	„	...	...	—	—	—
25—35	„	...	...	1	2	3
35—45	„	...	...	3	6	9
45—55	„	...	...	13	3	16
55—65	„	...	...	30	12	42
65—70	„	...	...	15	19	34
70—75	„	...	...	14	10	24
75—80	„	...	...	10	19	29
80—85	„	...	...	9	13	22
85—90	„	...	...	5	10	15
Over 90 years...	...			1	3	4
Totals				111	100	211

PRINCIPAL VITAL STATISTICS FOR THE YEAR 1962

				Urban District of Stanley	Aggregate of Urban Districts	Aggregate of Rural Districts	West Riding Admin. County	England and Wales
Population	..	..	..	17,200	1,200,410	476,850	1,677,260	*
Births	{	Live	..	297	21,010	8,782	29,792	*
		Still	..	3	385	176	561	*
		Total	..	300	21,395	8,958	30,353	*
Deaths of Infants	{	Under 1 week		4	270	125	395	*
		Under 4 weeks		5	322	145	467	*
		Under 1 year		6	479	216	695	*
Deaths (all causes)	..	..	..	211	15,218	4,843	20,061	*

CRUDE AND ADJUSTED RATES

Live Birth	..	..	.	17'3	17'5	18'4	17'8	18'0
Adjusted Live Birth	..	..	..	16'9	17'7	18'2	17'8	*
Death (All causes)	..	..	..	12'3	12'7	10'2	12'0	11'9
Adjusted Death	..	..	..	15'2	13'4	12'6	13'3	
Infective and Para. Dis. excl. Tub. but incl. Syph. & other V.D.				0'06	0'04	0'04	0'04	*
Tuberculosis, Respiratory	..	..	..	0'06	0'05	0'03	0'05	0'06
Tuberculosis, Other	..	..	..	—	0'01	0'00	0'01	0'01
Tuberculosis, All Forms	..	..	..	0'06	0'06	0'03	0'05	0'07
Cancer	..	..	..	2'56	2'14	1'65	2'00	2'18
Vascular lesions of Nervous system	..	..	..	1'63	1'97	1'52	1'84	*
Heart and Circulatory Disease	..	..	..	3'95	4'84	3'87	4'56	*
Respiratory Diseases	..	..	..	1'98	1'62	1'25	1'52	*
Maternal Mortality	..	..	..	—	0'09	0'45	0'20	0'35
Stillbirths	..	..	..	10'0	18'0	19'6	18'5	18'1
Perinatal Mortality	..	..	..	23'3	30'6	33'6	31'5	*
Neo-natal Mortality	..	..	..	16'8	15'3	16'5	15'7	15'1
Infant Mortality	..	..	..	20'2	22'8	24'6	23'3	21'4

* Figures not available.

All the maternal mortality, still birth and perinatal mortality rates are per 1,000 live and still births.

COMMENTS ON STATISTICAL DATA

The Infantile Mortality Rate, you will notice, is this year 20.20 per 1,000 live births. This is slightly better than the average for the Country as a whole and can be considered reasonably satisfactory in modern social conditions.

The Death Rate of 15.21 is slightly higher than average but these factors are often due to temporary fluctuations and have no permanent significance in relation to the health of the community. It is reasonable to suppose that the unusually hard Winter took its toll of elderly people.

Lung cancer accounted for 6 deaths, all in men. Anyone who is prepared to argue that there is no connection between cigarette smoking and lung cancer is quite obviously failing in realism. There is not the slightest doubt of the connection, and it is significant that all the deaths occurred in males. Men have been over former years, the heavier smokers. I am afraid that unless there is a considerable diminution in the number of cigarettes smoked by members of both sexes, future years will show a steady increase in the incidence of lung cancer in both males and females, as the present-day smoking habits of some women begin to take their toll. It is tragic that the incidence of lung cancer tends to occur in the 50-60 year age group, a period in life which normally should have an expectation of at least a further 15 years of healthy and enjoyable existence.

It is interesting to note that at any meeting of doctors nowadays, the cigarette smoker is in the minority, and that on many occasions on which 50 or more doctors have been present I have observed only one or two to smoke a cigarette.

No maternal death occurred during the year.

The incidence of Infectious Disease was very slight indeed and there was no epidemic of any kind.

It may be stated that with the exception of lung cancer, the statistics reported herein can be considered satisfactory.

CAUSES OF DEATH IN THE STANLEY URBAN DISTRICT, 1962.

CAUSE OF DEATH				MALES.	FEMALES.
All Causes				111	100
1.	Tuberculosis, respiratory	..	..	1	..
2.	Tuberculosis, other	..	..	..	..
3.	Syphilitic disease	..	..	..	..
4.	Diphtheria	..	..	..	..
5.	Whooping Cough	..	..	..	..
6.	Meningococcal infections	..	..	..	..
7.	Acute Poliomyelitis	..	..	..	..
8.	Measles	..	..	..	..
9.	Other infective and parasitic diseases	..	..	1	..
10.	Malignant neoplasm, stomach	..	..	2	4
11.	Malignant neoplasm, lung, bronchus	..	..	6	..
12.	Malignant neoplasm, breast	..	..	..	3
13.	Malignant neoplasm, uterus	..	..	..	1
14.	Other malignant and lymphatic neoplasms	..	..	15	11
15.	Leukaemia, aleukaemia	..	..	..	2
16.	Diabetes	..	..	..	..
17.	Vascular lesions of nervous system	..	..	13	15
18.	Coronary disease, angina	..	..	24	21
19.	Hypertension with heart disease	..	..	2	1
20.	Other heart disease	..	..	7	11
21.	Other circulatory disease	..	..	..	2
22.	Influenza	..	..	..	..
23.	Pneumonia	..	..	5	8
24.	Bronchitis	..	..	16	5
25.	Other disease of the respiratory system	..	..	..	..
26.	Ulcer of stomach and duodenum	..	..	1	1
27.	Gastritis, enteritis and diarrhoea	..	..	1	..
28.	Nephritis and nephrosis	..	..	..	..
29.	Hyperplasia of prostate	..	..	2	..
30.	Pregnancy, childbirth, abortion	..	..	..	..
31.	Congenital malformations	..	..	4	1
32.	Other defined and ill-defined diseases	..	..	5	11
33.	Motor vehicle accidents	..	..	2	..
34.	All other accidents	..	..	3	3
35.	Suicide	..	..	1	..
36.	Homicide and operations of war	..	..	..	..
Live Births.	Total	..	..	166	131
	Legitimate	..	..	158	129
	Illegitimate	..	..	8	2
Still-Births.	Total	..	..	1	2
	Legitimate	..	..	1	2
	Illegitimate	..	..	..	..
Deaths of Infants under 1 year of age.	Total	..	..	5	1
	Legitimate	..	..	5	1
	Illegitimate	..	..	..	..
Population				17,200	
Comparability Factors :—					
Births				0.98	
Deaths				1.24	

INFANT MORTALITY IN 1962

Deaths from Stated Causes under One Year of Age

CAUSE OF DEATH.	Under 1 Week.	1—2 Weeks.	2—3 Weeks.	3—4 Weeks.	Total under 1 Month.	1—3 Months.	3—6 Months.	6—9 Months.	9—12 Months.	Total under 1 Year.
Haemorrhagic pneumonia	1	—	—	—	1	—	—	—	—	1
Congenital Anencephaly ..	1	—	—	—	1	—	—	—	—	1
Extreme Prematurity ..	1	—	—	—	1	—	—	—	—	1
Asphyxia Neonatorum	1	—	—	—	1	—	—	—	—	1
Atelectasis										
Breech presentation										
Left sided pneumonia	—	—	—	—	—	1	—	—	—	1
Inexpansion of left lung										
Amytonia Congenita										
Congenital oesophageal atresia	—	1	—	—	1	—	—	—	—	1
Totals ..	4	1	—	—	5	1	—	—	—	6

INFANT DEATHS PER THOUSAND LIVE BIRTHS

1918—1922	1923—1932	1933—1942	1943—1952	1953—1962
	1923 87·3	1933 56·1	1943 54·2	1953 21·3
	1924 89·0	1934 85·0	1944 50·2	1954 48·2
	1925 103·0	1935 30·1	1945 45·0	1955 24·3
	1926 98·3	1936 34·7	1946 31·7	1956 17·3
	1927 67·3	1937 29·4	1947 53·1	1957 20·2
1918 133·2	1928 81·1	1938 69·5	1948 32·3	1958 22·6
1919 104·3	1929 62·3	1939 42·9	1949 25·3	1959 39·1
1920 100·5	1930 65·8	1940 72·3	1950 43·0	1960 14·6
1921 98·0	1931 60·2	1941 37·8	1951 39·1	1961 18·2
1922 98·0	1932 84·5	1942 47·6	1952 33·3	1962 20·2
Average— 106·8	Average— 79·9	Average— 50·5	Average— 40·7	Average— 24·6

Details of STILLBIRTHS for the past five years

Year	No. of Live Births	No. of Still- Births	Proportion of Stillbirths per 100 Live Births
1958	266	7	2·6
1959	256	2	0·8
1960	274	4	1·46
1961	274	5	1·92
1962	297	3	1·01

Details of NEO-NATAL DEATHS for the past five years

Year	No. of Live Births	No. of Neo- Natal Deaths	Proportion of Neo-Natal deaths per 100 Live Births
1958	266	3	1·1
1959	256	3	1·1
1960	274	3	1·1
1961	274	3	1·1
1962	297	5	1·68

GENERAL PROVISION OF THE PREVENTIVE MEDICAL SERVICES IN THE AREA

With slight modifications these have continued unchanged. The population of the total Health Division still tends to rise, largely as a result of development in a neighbouring Urban District. Co-operation with general practitioners, Hospitals, Divisional Education Officers and Divisional Welfare Officers has remained excellent.

There is a continually increasing amount of clerical work, but in spite of this the staff have coped admirably and it has not, so far, been necessary to ask for an increase in establishment. At the same time, it is necessary to point out that there is a limit to the amount of work which can be undertaken by a fixed number of clerical workers who are already almost fully extended. As each new service is introduced it inevitably carries with it a very considerable attendant volume of work, both of correspondence and of record keeping. So far this has been absorbed, but a time inevitably will come when increased establishment will have to be sought.

We have managed to maintain adequately our establishment of domiciliary nurses, and in this respect are more fortunate than some neighbouring Health Divisions. The midwifery section has been hit by illness to some extent, but at the time of writing we are almost back to normal, and difficulties are easing.

There has been some small backlog of work accumulating in the field of Ophthalmology, but we are fortunate in having been able, from time to time, to arrange for extra sessions, and we are managing to keep up with the pressure of work. It is only fair to point out that the larger volume of work is due to a change in the method of School Medical Inspections which results in earlier ascertainment of visual defect, rather than to any increase in the total percentage of school children needing attention. I feel that the present "bulge" will diminish during the next year or so, and that we shall be able to cope with our normal quota of ophthalmic sessions. For the convenience of Stanley residents I am arranging to have an Ophthalmic session regularly in the new Outwood Child Welfare Centre which is warm, comfortable, well equipped and conveniently situated.

Dr. Pickup still attends at a special monthly clinic at Rothwell, and deals efficiently and courteously with cases referred from various sources including the local general practitioners.

Children requiring dental treatment can attend either at the Central Dental Clinic in Wakefield or go to the Clinic in Carlton Lane, Rothwell, where Mr. Sleight still remains the Dental Surgeon in charge, and facilities are extremely good.

The relatively newly formed Mental Health section has continued to build up its activities and deals with a constantly growing volume of work. Later in the Report the Senior Mental Welfare Officer will give his comments on the present state of the Service.

SCHOOL MEDICAL SERVICE

The usual tables relating to the School Medical Service in the whole of the Divisional area are set out in the following pages.

You will remember that in my last Report I mentioned that non-routine medical inspections were being introduced on an experimental basis and that an assessment of the relative merits and demerits of both methods would be possible after a few years' experience. For your information, I have asked Dr. Bowker, Senior Assistant County Medical Officer, to give a short account of the system now being tried. Dr. Bowker has been almost entirely responsible for the introduction of this innovation in school medical inspections in this Divisional area. She is intensely interested, and has a very close liaison with the Head Teachers in the area. I am greatly indebted to her for the short account which follows.

"In 1953, the Minister of Education approved alternative arrangements for the periodic medical inspection of school children, and the Regulations were further modified in 1959. This freedom to experiment was accepted by your Medical Officer of Health and a scheme for the selective medical examinations of school children in your District has been in operation for one year.

"Before the experiment was launched, all head teachers were interviewed personally and almost without exception they expressed approval of the scheme and all signified their willingness to participate. During the year the medical staff have been very appreciative of their sustained interest and support.

"The routine medical examination of all school entrants and leavers remains. In the latter regard I should like to mention the working relationships between the medical and youth employment Staffs. It is a function of preventive medicine to lead the adolescent away from the type of work which would be injurious to health. Though the final responsibility naturally rests with parents, most are now ready to accept such advice.

"In the intermediate school years, the ages of 7 and 10 remain as the basis for a general review. The vision of all children is re-tested at these ages and it is hoped to

start routine hearing tests for the same groups shortly. These apart, routine medical examination of all children has been replaced by a "non-routine" or selective examination which obviates the necessity for spending time on robust and healthy children.

"It is obvious that the choice of children to be seen is most important and it is here that the clinical judgment of the school doctor, the concern of the parent, together with the observation and acumen of the head and class teachers and the school nurse must combine. Referrals for examination must, therefore, come from all these sources and this makes for a new awareness by all who are concerned with the child's well-being.

"The basis of a school medical list is the Health Summary form which is sent to parents of all children in these two age groups. These summaries, except in a very few instances, have been carefully completed. If the school doctor is not satisfied with the coverage, the child would certainly be seen.

"The school doctor scrutinises all replies, which are confidential, and then, in conjunction with earlier findings on the child's school medical record card, decides which children should be invited to attend for examination.

"I may say that the general question "Have you any special worries about your child ? " has resulted in some most revealing pointers and requests for help. Parental co-operation is well demonstrated by the fact that almost 11% of examinations have been made as the result of such requests, whereas 23% of the children have been called by decision of the school medical officer. 62% of the children in these age groups have been deemed not to require examination.

"Head-teachers and school nurses make their contribution to the school medical list, not only at these age groups, but in respect of any child whose health is giving cause for concern. I am confident that as the scheme develops, more referrals will come from teachers who are in an excellent position to note any seemingly minor deviations from a happy and progressive normality in their pupils.

"It cannot be too strongly stressed that the aim of the Service is to discover any medical reason for a child's

inability to make full use of, and derive full enjoyment from, the educational facilities provided. Physical handicaps of all types, disabilities and illnesses which cause chronic or recurring absence, the thwarting effects of inadequate school progress, emotional disturbances which lead to aggression or withdrawal or which are transferred to physical symptoms, inability to take part in physical education: all these should receive early attention and study.

“In the scheme, medical lists are shorter, since every child presents a problem of greater or lesser degree which in the context of his school life needs to be investigated. It has become clearer that some children require a deeper assessment, particularly in respect of psychological disturbances or inability to make satisfactory school progress, than has hitherto been possible.

“The benefits which have emerged from a year’s working of the scheme may be listed as a more fruitful allotment of the medical officer’s time, an even closer and more appreciative liaison between medical and teaching staffs, a more active participation by the parents, and pre-eminently, the recognition of further possibilities in constructive medical care within the framework of the service.

“The experiment continues.”

Our relationship with the Divisional Education Officers and their staffs has continued an extremely happy one.

The acceptance rate for the various procedures of immunisation continues good and bears comparison with other parts of the County Council’s area. We realise that only 100 per cent. acceptance can be considered perfect, and strive constantly to attain as nearly as possible this virtually impossible goal.

SCHOOL MEDICAL SERVICE
MEDICAL INSPECTION AND TREATMENT
1962

Age Groups Inspected (by years of birth)	No. of Pupils inspected	Physical condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of Col. 2	No.	% of Col. 2
1958 and later	88	88	100	—	100
1957	549	547	99·64	2	·36
1956	146	145	99·32	1	·68
1955	218	217	99·5	1	·5
1954	235	234	99·6	1	·4
1953	32	31	96·88	1	3·12
1952	261	260	99·6	1	·4
1951	228	228	100	—	100
1950	20	20	100	—	100
1949	3	3	100	—	100
1948	300	298	99·3	2	·7
1947 and earlier	448	446	99·6	2	·4
Total	2,528	2,517	99·6	11	·4

**PUPILS FOUND TO REQUIRE TREATMENT AT
PERIODIC MEDICAL INSPECTIONS
(Excluding Dental Diseases and Infestation
with Vermin)**

Age Groups Inspected (by year of birth)	For Defective Vision (exclu- ding squint).	For any of the other conditions recorded	Total individual pupils.
1958 and later ...	—	—	—
1957 ...	24	100	121
1956 ...	6	21	26
1955 ...	12	44	52
1954 ...	16	39	52
1953 ...	3	5	8
1952 ...	18	35	52
1951 ...	15	29	42
1950 ...	6	2	8
1949 ...	1	—	1
1948 ...	23	42	63
1947 and earlier ...	37	47	82
Total ...	161	364	507

OTHER INSPECTIONS

Number of Special Inspections ...	98
Number of Re-inspections ...	61

159

INFESTATION WITH VERMIN

Total number of individual examinations of pupils in schools by school nurses or other authorised persons	14,078
Total number of individual pupils found to be infected	75
Number of individual pupils in respect of whom cleansing notices were issued. (Section 54 (2), Education Act, 1944) ...	—
Number of individual pupils in respect of whom cleansing orders were issued. (Section 54 (3), Education Act, 1944) ...	—

**DEFECTS FOUND BY MEDICAL INSPECTION DURING
THE YEAR 1962
PERIODIC INSPECTIONS**

Defect or Disease.	PERIODIC INSPECTIONS							
	ENTRANTS		LEAVERS		OTHERS		TOTAL	
	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation	Treat- ment	Obser- vation
Skin ...	13	3	16	1	22	1	51	5
Eyes—								
a. Vision ...	28	22	49	36	84	25	161	83
b. Squint ...	13	6	—	—	4	—	17	6
c. Other ...	—	3	1	—	1	1	2	4
Ears—								
a. Hearing ...	5	2	7	4	24	10	36	16
b. Otitis Media ...	29	—	3	—	9	1	41	1
c. Other ...	—	—	—	—	2	1	2	1
Nose and Throat ...	11	8	7	—	8	11	26	19
Speech ...	4	17	—	2	9	7	13	26
Lymphatic Glands ...	—	1	—	—	2	—	2	1
Heart ...	2	—	2	2	4	9	8	11
Lungs ...	7	—	4	—	17	4	28	4
Developmental—								
a. Hernia ...	1	—	—	—	—	—	1	—
b. Other ...	—	—	—	—	—	—	—	—
Orthopaedic—								
a. Posture ...	1	—	10	—	13	1	24	1
b. Feet ...	1	1	3	—	8	6	12	7
c. Other ...	1	3	6	4	7	2	14	9
Nervous System—								
a. Epilepsy ...	1	—	—	—	—	—	1	—
b. Other ...	1	—	1	—	7	6	9	6
Psychological—								
a. Development ...	—	1	—	1	9	6	9	8
b. Stability ...	12	3	1	—	18	12	31	15
Abdomen ...	2	1	1	—	2	5	5	6
Other ...	26	10	3	—	20	8	49	18
Totals ...	158	81	114	50	270	116	542	247

SPECIAL INSPECTIONS

Defect or Disease	Special Inspections	
	Pupils Requiring Treatment	Pupils Requiring Observation
Skin	—	—
Eyes—		
a. Vision	2	—
b. Squint	—	—
c. Other	—	—
Ears—		
a. Hearing	—	—
b. Otitis Media	—	—
c. Other	—	—
Nose and Throat	—	—
Speech	—	—
Lymphatic Glands	—	—
Heart	—	—
Lungs	—	—
Developmental—		
a. Hernia	—	—
b. Other	—	—
Orthopaedic—		
a. Posture	—	—
b. Feet	—	—
c. Other	—	—
Nervous System—		
a. Epilepsy	—	—
b. Other	—	—
Psychological—		
a. Development	—	—
b. Stability	2	1
Abdomen	—	—
Other	4	—

**TREATMENT OF PUPILS ATTENDING MAINTAINED
AND ASSISTED PRIMARY AND SECONDARY
SCHOOLS (INCLUDING NURSERY AND SPECIAL
SCHOOLS)**

EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	—
Errors of Refraction (including squint)	597
Total ...	597
Number of pupils for whom spectacles were prescribed ...	421

**DISEASES AND DEFECTS OF EAR, NOSE AND
THROAT**

	Number of cases known to have been dealt with
Received operative treatment	
(a) for diseases of the ear ...	1
(b) for adenoids and chronic tonsillitis	6
(c) for other nose and throat conditions	—
Received other forms of treat- ment	—
Total ...	7
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) in 1962	1
(b) in previous years ...	10

ORTHOPAEDIC AND POSTURAL DEFECTS

	No. of cases known to have been dealt with
Pupils treated at clinics or out- patients departments ...	5
Pupils treated at school for postural defects ...	—
Total ...	5

DISEASES OF THE SKIN (Excluding uncleanliness)

	Number of cases known to have been treated
Ringworm— (a) Scalp ...	—
(b) Body ...	1
Scabies ...	—
Impetigo ...	—
Other skin diseases ...	—
Total ...	1

CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guid- ance Clinics ...	6

SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech thera- pists ...	55

OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
Pupils with minor ailments ...	15
Pupils who were admitted for convalescent treatment under School Health Service arrange- ments during 1962 ...	3
Other than above— U.V.R. Treatment ...	20
Total ...	38

CONSULTANT E.N.T. SERVICE

No Consultant E.N.T. Clinic held during 1962

CONSULTANT ORTHOPAEDIC SERVICE

Consultant Clinic.

Number of sessions held during year 10

	Pre-school children	School children
No. of individual patients seen by Consultant, including those continuing attendance from previous year	—	2
No. of individual patients referred for opera- tive treatment as short-stay cases only ...	—	—
Recommended long-stay hospital school ...	—	—
Recommended treatment by orthopaedic nurse or physiotherapist:—		
(a) at treatment centres	—	—
(b) domiciliary 	—	—
No. of children who obtained operative treat- ment during the year 	—	—
Total number of attendances at consultant clinic 	—	2
Treatment Centres		
No. of sessions held during year		
	Pre-school children	School children
Total number of patients treated (including cases continuing treatment from previous year) 	—	—
Total number of attendances 	—	—
Domiciliary Treatment		
Total number treated 	—	—
Total number of visits to patients' homes ...	—	—
Appliances		
Number of appliances—(a) recommended ...	—	—
(b) obtained ...	—	—

PAEDIATRIC SERVICE

Consultant Clinics.

Number of sessions held during the year 10

	Pre-school children	School children
Number of individual patients seen :—		
(a) new cases	7	15
(b) cases attending from previous year(s)	4	33
Total number of attendances at clinics ...	17	83

MEDICAL EXAMINATION OF ENTRANTS TO TRAINING COLLEGES

No. of examinations carried out during the year ... 29

CHILDREN AND YOUNG PERSONS ACT, 1933 EMPLOYMENT OF CHILDREN

Number of children examined during the year in connection with applications :—

(a) for employment (including entertainments) 85
 (b) No. of (a) found unfit —

ULTRA VIOLET LIGHT TREATMENT

No. of sessions held during the year	204	
	Pre-School children	School children
No. of children treated during the year	7	13
Total No. of attendances ...	63	172

PAEDIATRIC SERVICE

Summary of type of defect for which referred

Defect or Disease	Pre-School	School
Respiratory System, including E.N.T. Defects	4	12
Heart and Circulatory System ...	—	12
Incontinence	—	11
Nutritional	—	1
Migraine	—	1
Orthopaedic	1	3
Developmental	4	2
Mental Defect, including Educational Sub-normality	—	2
Genito-urinary System	—	1
Congenital Deformities	1	1
Gastro Intestinal System	—	1
Skin	—	1
Unclassified	1	—
Total	11	48

SPEECH THERAPY

Total number of sessions held during the year ...	...	187
No. of new cases treated during the year	... ..	19
No. of cases already attending for treatment from previous year	... ..	36
Total number of cases treated	... ..	55
No. of cases awaiting treatment at end of the year	...	12
No. of visits made to schools	... ..	17
No. of home visits ...	... ..	—

Analysis of Cases treated during the year :—

	Boys	Girls
Stammering	5	1
Defects of articulation—		
(a) Dyslalia	19	10
(b) Sigmatism	7	1
(c) Rhinolalia, due to—		
(i) Cleft Palate	1	—
(ii) Nasal obstruction	—	—
(d) Dysarthria	—	—
Aphasia	—	—
Defective speech due to—		
(i) Educational sub-normality	3	1
(ii) Deafness	—	—
Retarded speech development	1	2
Dysphonia	2	—
Other defects —		
Rhotacism	2	—
Total	40	15
Analysis of Cases discharged :—		
No. of children discharged during year—		
Speech normal	4	3
Speech improved	3	2
Unsuitable for treatment	—	—
Non-co-operation	—	—
Left school	—	—
Left district	4	—
Other reasons—		

VACCINATION AND IMMUNISATION

In the following pages you will find set out the Divisional figures relating to vaccination and immunisation. These disclose a reasonably satisfactory state of affairs, although, as I have said before, we are constantly striving for the unattainable 100% response. It is a fact, however, that the vast bulk of parents nowadays readily accept the prophylactic measures available for their children. Many are given treatment by their own doctors, some prefer to have it done at welfare clinics.

There is not the slightest doubt that the immunisation procedure is absolutely safe and effective. It is many years since even an individual case of Diphtheria was reported in your area and we are now reaching a position when the same can be said of Whooping Cough.

Oral poliomyelitis vaccine is now in universal use, and again this disease has been almost completely absent from the community.

The figures for smallpox vaccination show a sharp increase. This, of course, is due to the alarm which the recent Bradford outbreak occasioned. The official view is that the second year of life is the best time to have the infant vaccinated. In spite of my own preference for the first few months of life, I have no choice but to conform to the Ministry's ruling, and I am now recommending that children be vaccinated as soon as possible after their first birthday.

We are still awaiting a prophylactic against Measles. Hope has recently been expressed that one will shortly be produced. Measles is still an unpleasant illness although modern drugs have removed the fear of serious complications in all but a very few cases. However, if mass incidence can be prevented a considerable amount of illness and anxiety will be obviated.

B.C.G. vaccination continues to be readily accepted and has become a routine measure.

VACCINATION AGAINST POLIOMYELITIS

Vaccination during 1962

CLASS	No. who received 2 injections during year ended 31st December, 1962	Completed courses of Oral Vaccine during year ended 31st December, 1962
Children born in 1962	—	112
Children born in 1961	44	347
Children and young people born during years 1943 - 1960 ..	156	207
Young persons born during years 1933 - 42	37	82
Others	117	214
Total	364	962

Total number of persons who had received two injections at 31st December, 1962 :—

Children	12,162
Others	6,092

Total 18,254

Number of persons who had received three injections at 31st December, 1962 15,620

Number of children aged 5—12 who had received four injections at 31st December, 1962 3,067

Number of persons who received dose of oral vaccine after 2 injections 1,318

Number of children who received dose of oral vaccine after 3 injections 552

CLASS	No. of persons who had received doses of vaccine at 31st December, 1962	
	1 dose only	2 doses only
Children born 1962 ..	68	80
Children born 1961 ..	60	92
Children and young persons born in years 1943 - 1960	48	40
Young persons born in years 1933 - 1942 ..	20	18
Others	53	61
Total	249	291

DIPHTHERIA IMMUNISATION

Immunisation carried out during the year

	Children born in years :—						
	1962	1961	1960	1959	1958	1953-57	1948-52
No. of children who completed a full course of primary immunisation (including temporary residents) ...	274	338	24	4	5	22	7
Total number of children who were given a secondary or re-inforcing injection (i.e. subsequent to complete full course) ...	—	1	2	—	7	187	131

Immunisation in relation to Child Population

Age at 31.12.62 i.e. Born in Year	Under 1 1962	1—4 1961-1958	5—9 1957-1953	10—14 1952-1948	under 15 Total
Last complete course of injections (whether primary or booster)					
1958—1962 ...	274	2480	2385	1795	6934
1957 or earlier	—	—	832	2016	2848

No case of Diphtheria occurred in the Division during the year.

WHOOPIING COUGH IMMUNISATION

Immunisation carried out during the year

Age at Final injection	Number of children who completed a full course of immunisation including temporary residents)
Under 6 months	390
6 months to one year	223
1—2 years	25
2—3 years	5
3—4 years	5
Total ...	648

Immunisation in relation to Child Population

Age at 31.12.62 i.e. born in year :—	Under 1 1962	1 to 4 1961—1958	5 to 9 1957—1953	10 to 14 1952—1948	Under 15 Total
Number immunised ...	274	2,209	1,849	702	5,034

Whooping Cough notifications and Deaths in relation to Immunisation during the year

Age at date of notification	No. of cases notified	No. of cases included in preceding column in which child completed a full course of immunisation
Under 1	—	—
1	—	—
2	—	—
3	1	—
4	—	—
5 — 9	1	—
10 — 14	—	—
Totals ...	2	—

No death occurred from Whooping Cough in the Division during the year.

VACCINATION AGAINST SMALLPOX

Number of Persons vaccinated or re-vaccinated
during the year

Age at Date of Vaccination	Under 1	1 year	2 to 4	5 to 14	15 or over	Total
Number Vaccinated ...	342	177	278	892	793	2,482
Number Re-Vaccinated ...	—	—	37	384	1,095	1,516

IMMUNISATION AGAINST TETANUS

Immunisation carried out during the year

	Children born in years:—							Total
	1962	1961	1960	1959	1958	1953-57	1948-52	
Number of children who completed a full course of primary immunisation (including temporary residents) ..	274	337	26	10	8	41	18	714
Total number of children who were given a secondary or re-inforcing injection (i.e., subsequent to complete full course) ..	—	—	—	—	1	11	2	14

B.C.G. VACCINATION OF 13-YEAR OLD SCHOOL CHILDREN

1. No. of medical officers (including Divisional Medical Officer) approved to undertake B.C.G. Vaccination	3
---	---

Acceptances

(a) No. of children offered tuberculin testing and vaccination if necessary, whether the offer was made during the year or previously ...	725
(b) No. of (a) found to have been vaccinated previously	36
(c) No. of acceptances	559
(d) Percentage of acceptances, i.e., (c) to (a) — (b) ...	81.1

Pre-Vaccination Tuberculin test

(a) No. of children tested	525
(b) Result of test—	
(i) Positive	40
(ii) Negative	467
(iii) Not ascertained	18
	—
	TOTAL 525
(c) Percentage positive	15.6

Vaccination

No. vaccinated	460
-----------------------	-----

Tuberculin test twelve months after vaccination

(a) No. vaccinated in 1962	—
(b) No. tuberculin tested after 12 months	—
(c) Result of test—	
(i) Positive	—
(ii) Negative	—
(iii) Not ascertained	—
	—
	TOTAL —

B.C.G. VACCINATION—CONTACT SCHEME

Details of B.C.G. Vaccination of Contacts during the year 1962

[illegible]

LOCAL HEALTH AUTHORITY CLINICS

The newly built Clinic at Outwood was opened in October, 1962 and is, as expected, proving a great boon and blessing. The mothers and children have the benefit of attending a bright, clean, warm, modern building, whilst the staff enjoy the added comfort and dignity of working with up-to-date equipment and in pleasant surroundings. Many expressions of appreciation have been forthcoming and I feel that this Clinic is providing a long overdue amenity for the residents of your District.

The Wrenthorpe premises are adequate for their purpose and no complaint has arisen during the year.

At Stanley the Clinic, though rather dingy in appearance, is at least reported to be warm and comfortable and, whilst far from ideal, has served its purpose moderately well.

Consultant Clinics.—The services of an Ophthalmic doctor are available every week at Rothwell, and Dr. Pickup, our Consultant Paediatrician attends monthly. Both the above services are completely satisfactory and adequately fill our needs.

MENTAL HEALTH SERVICE

This important and expanding service has been consolidated during the year. The case load is increasing and it is obvious that the services of two whole-time Mental Welfare Officers are now necessary in this Health Division.

We are fortunate in that Mr. Emmerson, the Senior Mental Welfare Officer, has his headquarters in this office. Thus the closest possible liaison between ourselves and the Mental Hospitals is possible. A very happy relationship exists and no friction has occurred during the year.

For the following comments I am indebted to Mr. Emmerson:—

“Since my last Report the care and after-care case load of mentally ill and subnormal persons in this Division has risen from 160 to 220. This does not necessarily mean, however, that there has been an overall increase in the incidence of mental disorder: rather is it an indication that prior to the coming into operation of the Mental Health Act, 1959, the pre-care and after-care of the mentally ill was a somewhat neglected aspect of the work. Before the new Act a regular visiting service for the subnormal was instituted and some training was provided for them, but for the mentally ill little was done beyond the statutory duties of admission to Hospital and the care of such patients’ estates. Now that a fully integrated community mental health service has been established, more patients and their relatives are availing themselves of the help that is offered.

Intensive social work, aimed at the rehabilitation of the individual according to his needs and his capabilities, has occupied much of the time of the Mental Welfare Officers employed in this area. It will be appreciated that this type of social case work involves the closest possible liaison with Hospital Consultants and general medical practitioners, and it is with appreciation that I record the very real team spirit displayed by all concerned.

As mentioned in my last Report, several people from this area attend Psychiatric Social Clubs in neighbouring districts. I had hoped that such a Club would be formed in this Division but, as the staff is already committed to two evenings each week at these existing Clubs, in addition to being on stand-by duty at regular intervals for Hospital admissions and emergency work, this has not proved practicable. Indeed, the volume of work generally has increased to such an extent that I now intend to ask for the present establishment of $1\frac{1}{2}$ Mental Welfare Officers

(one Officer at present being shared with another Division) to be increased to two full-time Officers.

During the year the Mental Health Welfare Officers admitted 55 mentally ill patients from this Division to Psychiatric Hospitals, mainly Stanley Royd. Of this number, 26 were admitted on an informal basis but compulsory powers had to be used in respect of the other 29. In these days when emphasis is placed on informality of admission, the high proportion of compulsory cases would at first glance seem rather disappointing. One factor that must be taken into account, however, is that a number of patients enter Hospital informally without a Mental Welfare Officer being involved: the number so admitted is unknown to me but it is apparent that the ratio of informal admissions to those of compulsory nature is more favourable than indicated above. Further, of the 29 compulsory admissions, only one was under Section 26 of the Mental Health Act, 1959, which permits of detention for a period not exceeding one year (roughly equivalent to "certification" under former legislation). The remaining 28 were admitted for short-term observation (not exceeding 28 days) and at the end of that time the majority agreed to remain voluntarily to complete their treatment.

In the same period 12 subnormal patients were admitted to Hospital, all informally, and 8 of these were for short-stay periods in order to relieve the relatives.

Patients requiring training or occupation have been accommodated at Wakefield, Leeds or the Airedale Centre, near Castleford. However, the new Training Centre in Holmsley Lane, Rothwell, is now completed and I hope will be opened for the reception of about 60 patients, both children and adults, in the very near future. The Centre is of standard pattern and is absolutely up-to-date in all respects. Much will depend on the calibre of staff engaged and great care is being taken to ensure that the right type of person is appointed. The provision of this Centre will augment still further the community care of the mentally ill or subnormal, on which so much emphasis is placed by the Mental Health Act.

No Hostel for psychiatric patients has been provided in this Divisional area but one is in the course of construction in a neighbouring Division, and admission to it of patients living in your area will be made possible.

In concluding this paragraph I would like to pay tribute to the enthusiastic work which the Mental Welfare Officers have put in during the year and to the ready co-operation we have received from all concerned."

DOMICILIARY NURSING SERVICE

Health Visiting.—Although we have had our difficulties during the year, we have managed to remain effectively operative. One or two of the members of the nursing staff have had prolonged illnesses leading, I am sorry to say, to resignation in one instance. One assistant Health Visitor went for training and has now returned to duty as a fully qualified Health Visitor.

Home Nursing.—Two new Home Nurses have been recruited and are to take their Queen's Training very shortly.

Midwifery.—The Midwifery service has been augmented by the recruitment of a further midwife and is now up to establishment, which is a fortunate circumstance. There is a great shortage of domiciliary Midwives and we are lucky in being able to maintain our establishment.

During next year a Supervisory Nursing Officer is to be appointed to this area. We are to share her services with a neighbouring Division and it is hoped that her arrival will infuse even more enthusiasm into the nursing staff.

HOME HELP SERVICE

The demand for this service continues to be as great as ever and its administration ever more complicated. At the moment of writing our authorised allocation is the equivalent of 36 whole time workers. At the end of 1962 we were employing 88 part-time domestic helps, and a glance at the table will show you how they were deployed. Very few complaints were received and this is a remarkable tribute to a body of workers who frequently undertake the care of old people living in not too pleasant domestic circumstances. It is certain that without their help a very large number of old people, living alone, would fall into squalor or be driven to seek institutional care.

Every effort is made to ensure a fair allocation to each person needing help, and the Home Helps themselves are supervised by members of the nursing staff, who, in turn, report to me any variation in the needs of the person helped. The Home Help service is a most valuable one and is undoubtedly fulfilling a very necessary function.

DOMESTIC HELPS

Authorised Divisional Allocation.

(i)	Basic	...	...	...	34
(ii)	From Reserve Pool	(Average	...	...	—
	over the year)	...	...	...	—
	Total	...	...	...	34
					—

Number of Domestic Helps employed at 31st December, 1962—

(i)	Whole-time	...	...	—
(ii)	Part-time	...	...	88
	Total	...	...	88
				—

Cases provided with Domestic Help during year ended 31st December, 1962—

				No. of Cases	Hours employed
(i)	Maternity (including expectant mothers)	...	...	37	1,606 $\frac{3}{4}$
(ii)	Tuberculosis	...	...	2	173
(iii)	Chronic sick (a) aged 65 +	...	...	380	59,362 $\frac{1}{4}$
	or Aged (b) under 65	...	...	25	3,022 $\frac{1}{2}$
(iv)	Others	...	...	4	142
	Totals	...	...	448	64,306 $\frac{1}{2}$

Employment :—

Total No. of hours of all home helps employed between 1st Jan. and 31st Dec., 1962 \div 2184 (52 weeks x 42 hours) = No. of home helps that could have been employed full time. = 29.444

CHIROPODY SERVICE

This is as popular as ever, and is still being run on the lines indicated in my last report. There is some evidence of an increased demand for domiciliary treatment which, as you know, carries a much higher fee for the Chiropodist.

There is no evidence in your area of any appreciable abuse, and our percentage bears favourable comparison with other areas in the County.

CHIROPODY SERVICE

Number of sessions held during the year:—

(a) In Voluntary Clinics	...	...	...	341
				<hr/>

Number of patients treated:—

(a) In Voluntary Clinics	...	...	...	753
(b) In Chiropodist's Surgery		...	...	246
(c) In own homes	...	...	...	198
				<hr/>
			Total	...
				<hr/> 1,197 <hr/>

Number of Treatments given:—

(a) In Voluntary Clinics	...	...	...	3,269
(b) In Chiropodist's Surgery		...	...	1,152
(c) In own homes	...	...	...	755
				<hr/>
			Total	...
				<hr/> 5,196 <hr/>

AMBULANCE SERVICE

Already good, this service has maintained adequately its expected level of efficiency throughout the year. No complaint has arisen and any request has been met with prompt and courteous response. It is difficult to imagine any improvement in this valuable service.

LABORATORY FACILITIES

I am indebted to Dr. Little and the staff of the Medical Research Laboratory at Wakefield for the painstaking and prompt way in which they have carried out laboratory investigations on our behalf. Additionally, may I record my appreciation of the way in which our rather importunate demands for lymph were met during the smallpox outbreak.

Blood samples from ante-natal patients are sent to the laboratory at Seacroft and again the service extended to us is of the highest.

MILK AND FOOD SAMPLES

As hitherto bacteriological examination of water is carried out at the Medical Research Laboratory at Wakefield, chemical samples being analysed by the Analyst at Halifax. Both services have been efficient throughout.

HOSPITAL PROVISION IN THE AREA

Maternity Hospitals.—Our average monthly allocation of 18 bookings is still available to us and for these bookings we are the arbiters. They are reserved for obstetrically normal confinements needing beds on social grounds. This frequently presents considerable difficulty, and we endeavour, as fairly as possible to give preference to those patients who have bad housing circumstances, are overcrowded or in other social need. It is also considered desirable that first babies should be born in Hospital, and that mothers who have already borne a considerable number of children should be afforded the relative rest which a hospital confinement gives.

From time to time we have again been helped out by the Morley Health Division, whose allocation of beds is on a higher percentage than our own due to the greater hospital provision in their area.

I am of the opinion that allocation has been fairly made, and that, although occasional disappointments are inevitable, overall justice has been done.

Abnormal cases have had no difficulty in obtaining suitable accommodation. Our percentage of hospital births remains at round about 50%. The avowed aim of the Ministry is to achieve a 75% hospital confinement rate. Failing the provision of new hospitals in or near your area it is difficult to see how this target can be reached in the foreseeable future.

Infectious Diseases Hospitals.—You will note that nine cases were admitted to Hospital, all of which were sent in for observation with uncertain diagnoses. A few from your area are admitted to Snapethorpe Hospital, whilst others go to Seacroft. In both these Hospitals facilities are excellent and co-operation first class.

General Hospitals.—No change has taken place during the year and we are fortunate in being able to call upon the Hospital facilities in nearby Wakefield and to be situated reasonably close to a Teaching Hospital Centre.

Chronic Sick Hospitals.—There is some evidence that the proposed reduction in geriatric beds contemplated under The Ten Year Development Plan for hospitals is

being re-considered. I would go so far as to say that in this area there is need for a greater, rather than a smaller, provision. At the time of writing, the list of cases awaiting admission to the Headlands Hospital, stands at over 100, predominantly females. This is no reflection on the efficiency of hospital or staff, but underlines a great and growing need. In view of the increased longevity of the population, this need is only to be expected, and long-term planning must take account of the continuing trend.

Speaking for the Urban District it seems a pity that with two geriatric hospitals situated near the boundary, no direct access is possible for local inhabitants. I have explained fully in previous reports the reason for this but it still remains an apparent mystery to many of our people.

We still arrange the occasional exchange with the Pontefract group of hospitals and at the time of writing about 7 inhabitants of this Divisional area are patients in St. George's.

The standard of treatment and amenity in all the hospitals to which patients are admitted from your area remains high in spite of the acute staffing difficulties experienced by all hospitals of this type.

Welfare Accommodation.—Under the County Council's Ten Year Development Scheme the provision of a considerable number of new Homes for the elderly is contemplated. It is hoped that one may be built near your area. It is intended that ultimately the old workhouses, in which such a large proportion of our indigent elderly population must, of necessity, be housed, shall either be done away with completely or modified structurally in the most drastic manner. In their place, groups of Homes are to be established with Warden facilities, communal dining and recreation rooms, etc., etc., situated as near as possible to the former homes of those who will be accommodated in them. It must be borne in mind by our planners that this new type of provision is extremely likely to increase the demand for places. Elderly people naturally dread being removed from their homes and accommodated in what, to them, are vividly remembered as workhouses. The new type of accommodation with its accessibility to friends and cronies, its generally cheerful atmosphere and its greatly improved amenities, is bound to prove attractive to many who formerly clung pathetically to their old homes. I

expect to find a heavy demand for places, and to find that, in spite of the apparently lavish expenditure contemplated, demand far exceeds accommodation.

I would refer, once again, to my previous plea for a different type of accommodation to bridge the gap between Hospital and Home. There is a crying need for accommodation of this sort where some small nursing help such as assistance in dressing, washing, and feeding, can be given to patients who are unable to maintain themselves at home, and yet are not considered sufficiently in need to warrant hospital accommodation. I understand that the County Council have already made an approach to the Ministry on this matter but have not yet had a definite answer to their queries.

PREVALENCE AND CONTROL OF INFECTIOUS DISEASE

The incidence of notifiable Infectious Disease has continued at its present-day low level. As against 242 notifications of Measles in 1961, we only had 83 cases notified in 1962, the bulk of which were notified in the early part of the year. For the rest, no case of Poliomyelitis was notified. The only other factor worthy of note was the almost total absence of Whooping Cough from your community during the year, only two cases being notified. I am confident in attributing this fact to the percentage of children who have been protected by immunisation. I am equally confident that, if this immunisation rate can be maintained, Whooping Cough can be written off as an epidemic disease.

Sonné Dysentery gave rise to only one notification.

Food poisoning was completely absent from the community.

The overall picture is one of relative freedom from infectious disease and can be considered satisfactory.

Veneral Disease.—Quarterly Reports are to hand and these indicate no increase in incidence in spite of the experience of other areas where increases are regularly reported.

Infestations. — These are negligible. No Scabies occurred and very few dirty heads among school children were revealed by regular periodic examinations.

INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1962

Disease	Total all ages			Age distribution, 1962												Cases sent to Hospital, 1962	Deaths, 1962		
	1960	1961	1962	0 — 1 year	1 — 2 years	2 — 3 years	3 — 4 years	4 — 5 years	5 — 10 years	10 — 15 years	15 — 20 years	20 — 35 years	35 — 45 years	45 — 65 years	Over 65 years			Age unknown	
Acute Poliomyelitis
Scarlet Fever	2	...	...	3	...	...	...	...	...	...	...	1	...	...
Pneumonia	1	...	1	...	2	...	13
Acute Anterior Encephalitis
Meningococcal Infection
Erysipelas
Whooping Cough	1	...	1	...	...	...	...	...	...	...	...	...	...
Measles	6	15	9	39	1	...	...	1	...	...	...	1	...	...
Sonnè Dysentery	1	...	...	...	...	...	...	...	...	...	...
Food Poisoning
Observation	1	1	...	5	...	...
Puerperal Pyrexia
Totals	124	284	99	5	6	13	16	9	44	1	...	...	2	1	2	...	9	...	13

TUBERCULOSIS

The incidence of Tuberculosis continues to fall and has now reached an all-time low level. You will note from the tables that this year, only one new case of pulmonary tuberculosis was notified and there was one death in a middle-aged person.

Every effort to eradicate the few remaining foci of infection is made. The Public Health Service works in close concord with the Chest Physicians and regular joint meetings are held to discuss any new measure which may be taken to stamp out the last elements of infection.

The B.C.G. vaccination of school children and of contacts has continued through the year and the acceptance rate continues satisfactory. We are fortunate in that the standards of care given by the Chest Physicians and their staffs both at Leeds and Wakefield Chest Clinics are exceptionally high. Reports and information are regularly received, and we, in turn, do all we can to provide an accurate picture of the home circumstances of patients attending the Clinic for treatment. Miniature Mass Radiography sessions are held in your District from time to time and are very well attended.

The overall picture remains satisfactory and although there is no room for complacency I feel that solid progress continues to be made.

TUBERCULOSIS

Record of Cases during the year 1962

	Pulmonary		Non-Pulmonary	
	M	F	M	F
No. of cases on Register at beginning of year	20	21	3	2
No. of cases notified for first time during year	1	—	—	—
No. of cases restored to Register ...	1	—	—	—
No. of cases added to Register otherwise than by notification ...	2	—	—	—
No. removed to other districts ...	—	—	—	—
No. of cases Recovered ...	3	1	—	2
No. died from the Disease ...	1	—	—	—
No. died from other causes ...	—	—	—	—
No. Removed from Register :— Revised diagnosis ...	—	—	—	—
No. of cases on Register at end of year ...	20	20	2	0

New Cases and Mortality during 1962

Age Periods			New Cases				Deaths			
			Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
			M	F	M	F	M	F	M	F
0—1 year	...		—	—	—	—	—	—	—	—
1—5 years	...		—	—	—	—	—	—	—	—
5—10 „	...		—	—	—	—	—	—	—	—
10—15 „	...		—	—	—	—	—	—	—	—
15—20 „	...		—	—	—	—	—	—	—	—
20—25 „	...		—	—	—	—	—	—	—	—
25—35 „	...		—	—	—	—	—	—	—	—
35—45 „	...		—	—	—	—	—	—	—	—
45—55 „	...		1	—	—	—	1	—	—	—
55—65 „	...		—	—	—	—	—	—	—	—
Over 65 years	...		—	—	—	—	—	—	—	—
Totals	...		1	—	—	—	1	—	—	—

TUBERCULOSIS

New Cases and Deaths since 1943

Year			New Cases		Deaths	
			Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary
1943	...	...	21	3	9	—
1944	...	...	7	3	5	1
1945	...	...	10	7	2	2
1946	...	...	9	8	5	1
1947	...	...	12	2	4	1
1948	...	...	8	3	4	1
1949	...	...	17	4	4	—
1950	...	...	11	6	2	1
1951	...	...	8	—	1	—
1952	...	...	10	—	2	—
1953	...	...	11	—	1	—
1954	...	...	9	—	4	—
1955	...	...	6	—	1	—
1956	...	...	4	—	1	—
1957	...	...	4	—	—	1
1958	...	...	3	1	1	—
1959	...	...	7	1	2	—
1960	...	...	3	1	1	—
1961	...	...	2	—	—	1
1962	...	...	1	—	1	—

HOUSING

This subject is dealt with in some detail in Mr. Walker's report which follows this one in the same volume. Your Authority are continuing to make every effort to acquire suitable building land, and to continue with the provision of Council houses. At the present moment, however, you are being outstripped by private enterprise for reasons which are well known to everybody and over which you have no control. There is still a considerable backlog of unfit houses which have been represented and from which the tenants anxiously await new accommodation. In some cases their plight is an unfortunate one owing to the continuing dilapidation of property in which repairs can no longer be enforced. I remarked on this point last year and I feel that I must do so again, although I realise acutely your own impotence in dealing with the matter as expeditiously as you would like.

HOUSING STATISTICS, 1962 — STANLEY URBAN DISTRICT

1.	No. of Dwelling Houses in District	...	...	5,873
2.	No. of Houses included in above :—			
	(a) Back-to-back	...		158
	(b) Single back	...		18
3.	SLUM CLEARANCE			
	Estimated number of unfit houses at 31st December, 1962 in respect of which no representation has yet been made	...	...	278
	Details of future slum clearance programmes:—			
	Proposal to clear all back-to-back houses before 1966.			
4.	HOUSES IN CLEARANCE AREAS AND UNFIT HOUSES ELSEWHERE			
	No. of houses included in Representations made during the year:—			
	(a) In Clearance Areas	...		20
	(b) Individual unfit houses	...		25

HOUSES DEMOLISHED DURING THE YEAR IN CLEARANCE AREAS

No. of Houses Demolished:

Unfit for human habitation	...	...	...	20
Included by reason of bad arrangement	...			—
On land acquired under Section 43 (2) Housing Act, 1957	...	...	...	—

Persons displaced during year:

From houses unfit for human habitation	...			78
From houses included by reason of bad arrangement	...	...	...	—
From houses on land acquired under Section 43 (2) Housing Act, 1957	...	...	...	—

Families Displaced during year:

From houses unfit for human habitation	...	20
From houses included by reason of bad arrangement	... ..	—
From houses on land acquired under Section 43 (2) Housing Act, 1957	... ..	—

NOT IN CLEARANCE AREAS**No. of Houses demolished:**

As a result of formal or informal procedure under Section 16 or 17 (1) Housing Act, 1957	8
Local Authority owned houses certified unfit by the Medical Officer of Health	—
Houses unfit for human habitation where action has been taken under local Acts	—
Houses included in unfitness orders made under para. 2 of the Second Schedule to the Town and Country Planning Act, 1959	—

Persons displaced during year:

From houses to be demolished as a result of formal or informal procedure under Section 16 or 17 (1) of Housing Act, 1957	...	29
From local authority owned houses certified unfit by Medical Officer of Health	...	—
From houses unfit for human habitation where action has been taken under local Acts	...	—
From houses included in Unfitness orders	...	—

Families Displaced during year:

From houses to be demolished as a result of formal or informal procedure under Section 16 or 17 (1) of Housing Act, 1957	...	8
From local authority owned houses certified unfit by Medical Officer of Health	...	—
From houses unfit for human habitation where action has been taken under local Acts	...	—
From houses included in Unfitness orders	...	—

UNFIT HOUSES CLOSED

No. of Houses:

Under Sections 16 (4), 17 (1) and 35 (1) Housing Act, 1957, and Section 26, Housing Act, 1961	...	...	...	...	...	...	1
Under Sections 17 (3) and 26, Housing Act, 1957	...	...	...	...	...	...	—

Persons Displaced during year:

From houses to be closed:—

Under Sections 16 (4), 17 (1) and 35 (1) Housing Act, 1957, and Section 26, Housing Act, 1961	...	...	...	...	...	...	3
Under Sections 17 (3) and 26, Housing Act, 1957	...	...	...	...	...	...	—

Families Displaced during year

From houses to be closed:—

Under Sections 16 (4), 17 (1) and 35 (1) Housing Act, 1957, and Section 26, Housing Act, 1961	...	...	...	...	...	...	1
Under Sections 17 (3) and 26, Housing Act, 1957	...	...	...	...	...	...	—

Parts of Buildings Closed under Section 18, Housing Act, 1957:

Number of Houses	...	...	...	...	—
Number of persons displaced	...	...	...	...	—
Number of Families displaced	...	...	...	...	—

UNFIT HOUSES MADE FIT AND HOUSES IN WHICH DEFECTS WERE REMEDIED

After informal action by local authority:

by owner 44

After formal notice under Public Health Acts:

(a) by owner —

(b) by local authority —

After formal notice under Sections 9 and 16, Housing Act, 1957:

(a) by owner —

(b) by local authority —

Under Section 24, Housing Act, 1957:

(a) by owner —

UNFIT HOUSES IN TEMPORARY USE

POSITION AT END OF YEAR

Retained for temporary accommodation:

Under Section 48

No. of houses	...	...	...	...	...	—
No. of separate dwellings contained therein						—

Under Section 17 (2)

No. of houses	...	...	...	...	...	—
No. of separate dwellings contained therein						—

Under Section 46

No. of houses	...	...	...	...	...	—
No. of separate dwellings contained therein						—

Licenced for temporary accommodation under Section 34 or 53

No. of houses	—
---------------	-----	-----	-----	-----	-----	---

PURCHASE OF HOUSES BY AGREEMENT

Houses in clearance areas other than those included in confirmed orders or compulsory purchase orders

No. of houses	...	...	...	...	...	—
No. of occupants		...	...	...	...	—

No. of families rehoused during the year into Council owned dwellings

(a) Clearance Areas, etc.	...	...	...	28
(b) Overcrowding	...	...	...	8

RENT ACT, 1957

(a) No. of certificates of disrepair granted	...	Nil
(b) No. of undertakings to execute repairs given by owners to the local authority	...	Nil
(c) No. of certificates of disrepair cancelled	...	Nil

OVERCROWDING

Comments in connection with this problem —

NEW DWELLINGS

No. of new dwellings completed during the year:

By the Local Authority 26

By Private Enterprise 105

GRANTS FOR CONVERSION OR IMPROVEMENT OF HOUSING ACCOMMODATION

	Formal applica- tions received during the year	Applica- tions approved during the year	Number of dwellings completed during year
	Number of dwellings	Number of dwellings	
(a) CONVERSIONS (The number of dwellings is the number resulting from completion of the work)	—	—	—
(b) IMPROVEMENTS	37	37	28

DETAILS OF ADVANCES FOR THE PURPOSE OF ACQUIRING OR CONSTRUCTING HOUSES

S.D.A. Loans Scheme in operation and during the year
25 loans were made for this purpose.

SUPPLEMENTARY REMARKS

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply.—The supply and distribution of water is now the responsibility of the Wakefield and District Water Board. A good supply of wholesome water has been maintained throughout the year and no complaints were received regarding quantity or quality of the water. No figures as to the quantity of water supplied to the Urban District are now available.

Below is a copy of the result of one sample of water taken during the year:—

Total Solids	...	...	...	104
Free Ammonia	...	...	...	0.204
Mineral matter	...	...	...	80
Chlorides as NaCl.	...	...	...	20
Albuminoid Ammonia	...	...	...	0.048
Oxygen absorbed in 4 hours at 80° C.	...	...	...	.08
Nitrous Nitrogen	...	...	...	Nil
Nitric Nitrogen	...	...	...	2.
Total Hardness	...	...	...	56
Permanent Hardness	...	...	...	52
Temporary Hardness	...	...	...	4
Acidity CaO	...	...	...	Nil
Alkinity in terms of CaCO ₃	...	...	...	10.
pH Value	...	...	...	7.3
Colour — Hazen Units	...	...	...	Nil
Turbidity — Silica Scale	...	...	...	Nil
Manganese as Mn.	...	...	...	Nil
Iron as Fe	...	...	...	Nil
Lead in Solution	...	...	...	Nil
Lead dissolved in 24 hours	...	...	...	Nil
Free Chlorine — actual free	...	...	...	0.1
Total including chloramines	...	...	...	0.2

Sewage Disposal.—There has been no major change during the year and the results and effluents are satisfactory.

Drains and Sewers.—Plans were undertaken for the construction of a relief sewer in Newton Lane and for the relaying of a sewer which had subsided in Lingwell Nook Lane, and the work on these improvements was carried out early in 1963.

Matters relating to Public Cleansing, Closet accommodation, Camping Sites, Disinfestation and Smoke Abatement, are fully dealt with in the report of the Senior Public Health Inspector.

Swimming Baths and Pools.—No public baths exist in Stanley Urban District.

Factories and Workshops.—Parts 1 and 8 of the Act fall within the scope of administration of this Authority. Appended is a list of Outworkers and it will be noted that no special action has been necessary throughout the year. Routine inspections have been carried out in respect of Part 1 of the Act and again no special action has been necessary.

CASES IN WHICH DEFECTS WERE FOUND

(If defects are discovered on two, three or more separate occasions, they should be reckoned as two, three or more cases).

				No. of cases in which defects were found				Number of cases in which Prosecutions were instituted
				Found	Remedied	Referred :		
						to H.M. Inspector	by H.M. Inspector	
Want of cleanliness	..	..	3	3	—	—	—
Overcrowding	..	..	—	—	—	—	—
Unreasonable temperature	..	..	—	—	—	—	—
Inadequate ventilation	..	..	—	—	—	—	—
Ineffective drainage of floors		..	—	—	—	—	—	
Sanitary Conveniences :—								
Insufficient	..	..	—	—	—	—	—
Not separate for sexes	..	..	2	1	—	—	—
Unsuitable or defective	..	..	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork)	..	..	—	—	—	—	—
Total			..	..	2	1	—

OUTWORK.

Nature of Work	No. of Out-workers in Augus list required by Sec. 110 (1)	Section 110			Section 111	
		No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-wholesome premises	Notices Served	Prosecutions
WEARING APPAREL :—						
Making, etc. ..	1	—	—	—	—	—
Cleaning and washing ..	—	—	—	—	—	—
Textile Weaving ..	—	—	—	—	—	—
TOTAL ..	1	—	—	—	—	—

FACTORIES ACTS, 1937 to 1959
INSPECTION FOR PURPOSES OF PROVISIONS AS TO
HEALTH.

(Including Inspections made by Public Health Inspector).

	No. on Register	Number of:—		
		Inspections	Written Notices	Occupiers prosecuted
1. Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	13	12	—	—
2. Factories not included in (1) in which Section 7 is enforced by the Local Authority	30	48	2	—
3. Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) ..	4	34	—	—
TOTAL	47	94	2	—

SANITARY INSPECTION OF THE AREA

Milk and Dairies

Milk Samples taken	24
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Food and Drugs Inspections

Meat Inspections	1,089
Bakehouses	32
Food Inspections	345
Ice Cream Sampling	...	...	...	...	12
Fish Shop Inspections	...	...	...	...	36
Water Sampling	...	...	...	...	1

Housing

Houses inspected and recorded	...	...	...	...	312
General Surveys	...	...	...	...	28
Public Health Act Inspections	116
Re-visits	120

Offensive Trades

Inspections of Knackers Yards	16
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Sanitary Matters

Inspection of Verminous Premises	5
Inspection for Rat and Mice Infestation	131
Smoke Observations	...	...	...	...	36
Inspection re. Refuse Removal and Disposal	...	...	...	...	463
Factories and Workshops	...	...	...	...	90
Tents, Vans and Sheds	...	...	...	...	16
Inspection for Nuisances	.....	...	...	...	289
Council house inspections and repairs	...	...	...	...	2,976
Miscellaneous	...	...	...	...	180

ANNUAL REPORT
of the
PUBLIC HEALTH INSPECTOR AND
CLEANSING SUPERINTENDENT
(D. Walker, Ass. R.S.H., M.A.P.H.I.)
for the year
1 9 6 2

To the Chairman and Members of the
STANLEY URBAN DISTRICT COUNCIL.

Gentlemen,

I beg to submit this my twelfth report upon the work done by your Health Department.

Many of the records of inspections and much of the statistical data are to be found in the Report of the Medical Officer of Health. Shortage of building labour in all the trades continues to make the carrying out of repair work to the older type properties a very difficult and costly proposition, although the building of new houses appears to be continuing, and indeed increasing, with no labour difficulties. This is apparently due to the fact that quite a large number of the new houses are being built by outside contractors who bring their own tradesmen, and the better wages being paid contracting on this type of work.

The Council's own building programme, however, has been covered wholly by the employment of local labour and this has taken place over the past few years.

The very heavy gales which were experienced during the early part of the year, together with the very frosty and snowy weather during the latter part of the year increased the repair difficulties and caused considerable damage to properties of all types throughout the district.

The Council's Slum Clearance work has been continued satisfactorily and the Council are now well on the way with their second five years' programme which envisages dealing with 352 houses. So far, 44 of these houses have been dealt

with and rehousing is progressing slowly but reasonably satisfactorily. It is hoped that during the next few years the sites which have been cleared will be redeveloped.

The Slum Clearance programme and the Rent Act, 1957, have resulted in a good number of better type houses being repaired and an enormous reduction in the number of complaints received by the department respecting repairs to property and in most instances the complaints received refer to property scheduled for dealing with as Slum Clearance property during the next five years or property damaged by the heavy gales which were experienced during the year.

Improvement grants have again increased with the introduction of the statutory grant arrangement but as in the past years, have been limited to owner occupiers and only in isolated instances have rented properties been improved.

Houses in the area for letting, other than Council houses, have been very small in number as practically all the vacant property is being sold at enhanced prices, although in many cases the houses have been included for fairly early consideration in the Council's proposed Slum Clearance programme.

At the end of 1962 there were 314 applicants for Council houses and 171 for bungalows and one bedroomed flats.

Meat inspection work has continued on a heavy scale and details are shown in a later portion of the report. So far as is known all meat killed in the district is inspected and the major portion of it is marked under the meat marking regulations.

During the year only 26 houses were completed by the Council, these being erected on the new estate in Potovens Lane, Outwood. These were made up of 22 three bed-roomed type and 4 two bedroomed type and formed an extension to the estate commenced two years ago.

The reason for the small number of houses completed was the very bad weather which was experienced, particularly during the latter part of the year when frost and snow resulted in almost all building operations being suspended.

Mr. N. Buckle, who served as Additional Public Health Inspector in the department left during October to take up the post of Chief Public Health Inspector to Bourne Urban District Council. Mr. Buckle had been with the Council for 5½ years and I should like to wish him the best of luck and success in his new appointment. Mr. T. Howard took up duties as Additional Inspector in Mr. Buckle's place, on the 1st November, 1962, having previously being at Aireborough U.D.C.

I should like to express my appreciation to the Chairman and Members of the Council for the encouragement and consideration they have given me during the past twelve months.

ABATEMENT OF NUISANCES

Number of Privies converted into W.C's	...	...	11
„ „ W.C's provided	...	...	11
„ „ Choked drains and W.C's cleared	...	...	151
„ „ Sink wastes repaired	...	...	5
„ „ Defective drain repairs	...	...	5
„ „ Water closets repaired	...	...	20
„ „ Inspection chambers repaired	...	...	1
„ „ Eavesgutters/downspouts repaired	...	...	9
„ „ House roofs and damp walls repaired	...	...	20
„ „ Flooded cellars	...	...	16
„ „ Damp houses remedied	...	...	60
„ „ House floors repaired	...	...	18
„ „ Walls replastered	...	...	10
„ „ New sinks fixed	...	...	4
„ „ Windows re-corded and repaired...	...	...	6
„ „ Fireplaces repaired	...	...	5
„ „ Defective dustbins removed	...	...	245
„ „ Verminous premises	...	...	4
„ „ Dirty premises	...	...	1
„ „ Beetle infested premises	...	...	12
„ „ Rat infested premises	...	...	131
„ „ Burst services	...	...	6
„ „ W.C. Soil pipes repaired	...	...	20
„ „ Doors repaired/renewed	...	...	15
„ „ Cooking ranges repaired	...	...	5
„ „ Defective chimneys	...	...	13
„ „ Insanitary yards	...	...	1
„ „ Accumulations of refuse	...	...	2
„ „ Dangerous buildings	...	...	14

MEAT AND FOOD INSPECTION

Meat inspection has again taken up a great deal of time during the year and slaughtering has continued on a scale similar to last year. The actual number of animals slaughtered was 553 more than last year. The Ministry of Agriculture, Fisheries & Food grant for excessive meat inspection realized £273 as against £248 for 1961.

Meat marking has continued during the year at the bacon factory and continues to work satisfactorily. During this time, 25,259 carcasses were inspected and marked by the Inspector on duty and this represents 92.4% of the meat slaughtered in the district and is most satisfactory. It is pleasing to note that marking of all carcasses is now being considered by the Ministry.

3 slaughterhouse licences were renewed for a further period of 12 months, to the end of December, 1962 and one was renewed later in the year following extensive reconstruction and alteration work which was necessary to bring it to the standard required by the Slaughterhouse Act, 1958.

The appointed day for the district was fixed as 31st January, 1962, which was 3 months later than that suggested by the Council. The Slaughterhouses are also inspected at intervals by the Ministry of Agriculture, Fisheries & Food inspectors and they appear to be generally satisfied with the premises.

Weekend slaughtering is now non-existent and practically all slaughtering is being carried out at hours which are reasonable from the inspection point of view.

Bovine tuberculosis appears to have been almost eradicated from the dairy and stock herds by the Ministry of Agriculture, Fisheries & Food scheme of attested herds and slaughtering of re-acting cattle. This is reflected in the small amount of meat which has been condemned during the year and the condemnations for bovine tuberculosis are now negligible.

The Public Health Laboratory staff, as in past years, have been very helpful, having examined and advised upon any specimens of a doubtful character which have been taken to the laboratory at various times.

Details of visits, animals slaughtered, and condemnations made are shown below:—

Total visits	...	...	1,089	Cows inspected	....	1,075
				Cattle	,,	... 463
Carcases marked (Public Health) Meat Reg.	25,259			Calves	,,	... 1
				Pigs	,,	... 23,198
				Sheep	,,	... 2,581
Condemnations:						
1 Cow Carcase & all Organs	558 lbs.	Septic Metritis				
1 ,, ,, ,, ,, ,,	465 lbs.	Septic Pneumonia				
1 Forequarter of beef	... 60 lbs.	Taint & Decomposition				
1 Cow Forequarter	... 43 lbs.	Bruised				
2 Beef Forequarters	... 300 lbs.	Bruising & Oedema				
2 Beef Forequarters	... 51 lbs.	Abscesses				
1 Hindquarter of Beef	... 172 lbs.	Decomposition				
Beef Trimmings	... 64 lbs.	Bruising				
Bovine Heads & Tongues	2	Actinobacillosis				
,, Livers	... 19	Abscesses				
,, ,, ...	... 9	Cavernous Angioma				
,, ,, ...	... 1	Distomatosis				
,, ,, ...	... 9	Cirrhosis				
,, ,, ...	... 1	Tuberculosis				
,, ,, ...	... 1	Hepatitis				
,, Lungs	... 2	Pleurisy				
,, ,, ...	... 1	Abscesses				
,, ,, ...	... 3	Disomatosis				
,, Hearts	... 1	Cysticercus Bovis				
,, Udders	... 6	Mastitis				
16 Pig Carcases & all Organs	630 lbs.	Emaciation				
4 ,, ,, ,, ,, ,,	357 lbs.	Swine Erysipelas				
5 ,, ,, ,, ,, ,,	677 lbs.	Pyaemia				
3 ,, ,, ,, ,, ,,	284 lbs.	Bruising				
5 ,, ,, ,, ,, ,,	696 lbs.	Moribund				
2 ,, ,, ,, ,, ,,	106 lbs.	Fevered				
42 ,, ,, ,, ,, ,,	2330 lbs.	Swine Fever				
4 ,, ,, ,, ,, ,,	281 lbs.	Abscesses				
3 ,, ,, ,, ,, ,,	168 lbs.	Peritonitis				

1	Pig	Carcase & all Organs	37	lbs.	Oedema
1	„	„ „ „ „ „	160	lbs.	Multiple Tumours
1	„	„ „ „ „ „	114	lbs.	Uraemia
1	„	„ „ „ „ „	24	lbs.	Pneumonia
4	„	„ „ „ „ „	142	lbs.	Multiple Abscesses
1	„	„ „ „ „ „	177	lbs.	Jaundice
1	Sow	Carcase & Organs ...	335	lbs.	Septic Metritis
4	Pig	Forequarters ...	120	lbs.	Abscessed
5	„	Legs ...	66	lbs.	„
4	„	Shanks ...	9	lbs.	„
3	„	Hocks ...	10	lbs.	„
2	„	Shoulders ...	19	lbs.	„
8	„	Legs ...	181	lbs.	Bruising
3	„	Shanks ...	8	lbs.	„
2	„	Hindquarters ...	36	lbs.	„
1	„	Head & fore of pork	22	lbs.	„
2	„	Hocks ...	5	lbs.	„
		Pork trimmings ...	40	lbs.	„
4	Pig	Forequarters ...	114	lbs.	Septic Pneumonia
1	„	Shank ...	6	lbs.	Arthritis
2	„	Forequarters ...	30	lbs.	Pneumonia
1	„	Leg ...	10	lbs.	Broken
	Pig	Heads ...	335		Tuberculosis
	„	Livers ...	1		Cysts
	„	„ ...	124		Cirrhosis
	„	„ ...	24		Necrosis
	„	Lungs ...	1635		Pneumonia
	„	„ ...	328		Pleurisy
	„	Plucks ...	160		Pleurisy and
					Hepatitis
	„	Hearts ...	435		Pericarditis
	„	Mesenteric Fats ...	131		Tuberculosis
	„	Kidneys ...	12		Cystitis
	„	„ ...	24		Nephritis
	„	Stomachs & Intestines	24		Enteritis

MILK AND OTHER FOODS

24 official samples of milk were purchased from retailers of the district and submitted to the Public Analyst for analysis. All were reported upon as being genuine milk.

Practically all milk sold in the district is processed and bottled at large dairies in nearby towns where a close check on quality and cleanliness is made. These dairies possess their own laboratories and qualified staff for this purpose. Under these circumstances frequent sampling is unnecessary.

345 visits were made for the purpose of inspecting the various food shops and food preparation premises in the district and it was found necessary to condemn the following articles of food for the reasons shown:—

3 x 4 lbs. chopped pork	...	...	Decomposition
5 x 92 ozs. 'U.M.' brand stewed steak			„
40 English Gammons—557 lbs	...		„
2 x 6 lbs. Jellied Veal	...	...	„
1 x 6 lbs. Ox Tongue	...	...	„
7 x 6 lbs. Corned Beef	...	...	„
3 x 2 lbs. 3 oz. tins Tomatoes	...		„

BAKEHOUSES

32 inspections were made of the bakehouses in the district and only minor defects were found, and these were made good on verbal intimation to the owners concerned. There are 3 bakehouses in the district.

ICE CREAM

12 samples of Ice Cream were taken for bacteriological examination.

There are no Ice Cream manufacturers in the district and all Ice Cream sold in the shops is pre-packed and of well known proprietary brands. 53 shops were registered for the sale of Ice Cream under the Food and Drugs Act, 1955, and these are regularly inspected.

The Ice Cream vans visiting the area are mostly owned by multiple firms; these are of modern type, with satisfactory washing facilities for the use of the driver.

FOOD HAWKERS

27 hawkers are registered under the West Riding (General Powers) Act, Section 76, and 14 premises for the storage of food for hawking.

This method of selling continues to become more and more popular and is causing much concern to the shop owners in general. The type of vehicle used varies greatly but there is a tendency for a continued improvement to be made. Some of these vehicles, however, which have been converted from vehicles previously used for different trades, leave much to be desired from many points of view.

The vans are inspected as and when they are seen in the district and during the year 86 inspections were made.

OFFENSIVE TRADES

No offensive trade is carried on in the district although fat melting and extracting is carried on, on a small scale, at the bacon factory, a kitchen waste processing plant, and at the Knacker's Yard, Kirkhamgate.

During the year the Knackers Yard has been the subject of complaints from the neighbourhood due to the offensive odour emanating from the plant installed for the purpose of meat sterilisation and which is used for fat extracting at the same time. The cause of the nuisance appears to be the age and type of raw material processed. A day to day observation was kept on the premises during the summer and the occasions on which there was cause for complaint were very rare during this time. During the previous year the complaints were coming in daily and there is no doubt that the position has been greatly improved during the past twelve months.

In other matters the Knacker's Yard is kept in a satisfactory condition structurally and from the cleanliness point of view. The installation of a large refrigerated room has improved the facilities at these premises.

FISH AND CHIP SHOPS

There are 17 shops registered with the Council under the Food and Drugs Act. During the year 36 visits were made to these premises. There is a good class of shop in the district generally and improvements are continually being made.

FACTORIES AND WORKSHOPS

94 visits were made to factories and workshops in the district and the premises found to be satisfactory. No notices were received from H.M. Inspector of Factories in respect of any fault found in his department.

The number of premises on the register at the end of the year was 30 with, and 13 without, mechanical power.

SMOKE ABATEMENT

The main sources of smoke from industrial chimneys in the district are two colliery chimneys, three brickwork chimneys, and three small factory chimneys.

The main site of nuisance is in the area around the Lofthouse Colliery and the main railway line adjoining. The nuisance at this point is caused by the smoke from the shunting engines in the colliery yard and the main line steam trains. The N.C.B. have been asked to consider diesel engines for shunting purposes and this together with the diesel electrification programme of the British Railways should alleviate this nuisance. The building up of the area adjoining these premises has caused complaints as the houses have been occupied.

Electrification of the winding gear at the Lofthouse Colliery and alterations to steam plant at the Farm Stores bacon factory has greatly reduced the amount of smoke from these properties and the only other industrial chimneys now causing pollution on any scale at all are those of the nearby brickworks.

All new houses built in the district are subject to the bye-law requiring the installation of grates suitable for the burning of smokeless solid fuel, but in spite of this, bituminous coal still remains the principal fuel.

Electricity and gas continue to gain favour for cooking purposes and less and less people are installing the combination type fireplace. The Council have in their latest schemes for new houses and bungalows continued the policy of allowing a choice of independent cooker with a tiled fireplace and no combination fireplaces are at present being fitted to new Council properties.

During the year 161 old pre-war fireplaces were replaced in Council houses and these were replaced by 42

modern type combination fireplaces and 119 tiled fireplaces with 49 gas cookers and 62 electric cookers.

The question of Miner's home coal has now been made the subject of national agreement and our great obstacle to the formation of smokeless zones has been removed. It should now be possible for the requirements of the Clean Air Act to be more easily put into operation.

During the year 16 observations were taken of the various chimneys in the district. Of these, 3 gave readings of smoke emission for a period in excess of two minutes in thirty.

COLLIERY TIPS

There is no nuisance from Colliery tip fires as the tips in the area which did cause trouble have burned themselves out.

The tip at Stanley, which is used by Newland Colliery, whilst at times shows slight signs of fire, is not sufficient to cause a nuisance.

Red shale is being removed in large quantities from the large stack at Lofthouse Colliery and whilst this process is causing complaints of nuisance from dust and excessive road traffic along the lane leading to the tip it is hoped that it will be possible for the whole of the stack to be cleared and the site restored back to good land.

There is no nuisance now from the newer tip in the Rothwell area which abuts on Lingwell Nook Lane, Loft-house Gate, as the attention given by the N.C.B. to the tip has kept down the fire and the fumes to a very reasonable level on the Stanley side. Waste material from Lofthouse is also being used to fill in the nearby clay quarry.

HOUSING

General Housing inspections still take up a considerable amount of time although Slum Clearance work and the Rent Act have reduced the number of Housing repair complaints. The acute shortage of labour for general housing repairs still continues. Shortage of building labour is still experienced in the Council's own maintenance staff, particularly in the bricklaying trade and costs have continued to increase considerably. Much of the work outstanding on repair notices have had the work set out

arranged by the owners but awaiting attention of the tradesmen concerned. In view of this shortage of labour, general housing inspections are not carried out as routine work of the department but only where Clearance action is contemplated, or where complaints have been made by the tenant.

No applications were received during the year for certificates of disrepair.

The suggested Slum Clearance programme has continued during the year when houses were dealt with under the various Clearance sections of the Housing Acts. 3 Clearance areas containing 20 houses were represented and confirmed. The remaining 29 houses were dealt with as individual unfit houses and in no case was there any appeal or opposition by the owners.

Only 26 Council dwellings were completed during the year compared with 40 last year. 4 of these were 2 bedroom type and 22 3 bedroom type.

All the new houses were again let to tenants of condemned houses in order to attract the Government subsidy, although as in the past, by the arrangement of transfer and exchange, the best possible use of the available accommodation has been made.

52 relettings of Council houses during the year were as follows:—5 to families in lodgings, 13 to overcrowded families, 12 aged persons' bungalows or flats and 22 to special cases (including 3 families rendered homeless by severe gale damage).

The total number of houses, flats and bungalows, owned by the Council at the end of the year was 1,806.

In spite of the 934 houses built by the Council since the end of the war and the extensive private residential development throughout the area, there still remains a shortage of housing accommodation in the district. Building land is becoming scarcer and more difficult to obtain with a subsequent increase in the prices being demanded for available land.

105 houses were built by private enterprise during the year but only very few of these have been sold to persons on the Council application list or already living in Council houses.

In view of the Government subsidy policy all new houses built by the Council have been utilised for the rehousing of Slum Clearance tenants and whilst this policy continues it will be a long time before many of the young couples now in lodgings will be given the offer of a Council house owing to the very small number of relets which become available from time to time.

The Council's application list at 31st December, 1962, showed the following applicants for Council houses:—

In lodgings	...	...	...	70
Not in lodgings	...	...	...	244
Bungalows or 1 bedroom flats				171
				<hr/> 485 <hr/>

The Council are proceeding with their scheme for the replacement of fireplaces in their pre-war houses at a weekly rent increase of 2/- per week to cover the cost of approximately £56 for the replacement.

161 fireplaces were replaced during the year, as follows:—42 combination ranges and 119 tiled fireplaces with Gas or Electric cookers.

From these figures it is obvious that the combination range is rapidly losing favour even in mining areas and is giving way to the tiled fireplace and independent cooker.

During the year 42 refrigerators were installed on rental to tenants of both pre-war and post-war houses. There are now 471 refrigerators installed in Council property on rentals ranging from 1/7 to 2/4 per week.

37 improvement grants were made during the year for the improvement of older type houses, mainly towards the cost of provision of hot water and bath systems and inside W.C's. In all the cases the applicants were owner / occupiers.

OVERCROWDING

The Council's point scheme is based upon bedroom accommodation rather than total room accommodation and on this standard 27 applicants for Council houses, not including persons living in lodgings, were living in overcrowded conditions and 16 families occupy houses where

the sleeping accommodation causes moral overcrowding. No statutory overcrowding has been notified or found by inspection.

PRIVY CONVERSIONS

Following the completion of the sewer in Batley Road, Kirkhamgate, 9 privies were abolished and 14 W.C's provided, so that each house has the sole use of a water closet.

There are 5,819 houses provided with water closets.

CESSPOOLS AND SEWAGE WORKS

The road gullies and the 15 cesspools in the district have all been cleansed regularly by the Council's 750 gallon mechanical gully and cesspool emptier. The machine has continued to be loaned to the Ossett M.B.C. and Horbury U.D.C. and has allowed economical service to be provided.

Gross income from other Authorities during the year amounted to £565.

TENTS AND CARAVANS

Only one caravan is at present being used as a permanent dwelling.

The sites at the Drum and Monkey, Outwood, Sun Inn, Lofthouse Gate, and White Hart Inn, Lingwell Gate Lane, are all used during the winter period by members of the Showmen's Guild but are cleared away during the summer. None of these sites are satisfactory as permanent camping sites, and recent building up of the adjoining area has resulted in complaints being made during the period that the sites have been occupied.

VERMINOUS PREMISES

The houses of persons allocated Council tenancies are inspected prior to removal, and where necessary sprayed with insecticide.

All the refuse tips are treated for cricket and fly infestations at regular intervals during the warmer weather.

131 properties were treated for the eradication of rats and mice, the only major infestations being on the refuse tips and sewage works.

URINALS

The two urinals in the district have been regularly cleansed and are kept as clean as possible. They have been subject to a considerable amount of damage to fittings, windows, etc., during the year and their condition has deteriorated in spite of efforts to keep them repaired. It is hoped that during next year it will be possible for further public toilet accommodation to be provided as it is becoming more and more necessary with the general practice of public house toilets being taken inside the premises.

CLEANSING

The cleansing of the district is carried out by direct labour, the staff consisting of one foreman, three drivers, and eleven labourers. The foreman of the department, Mr. Asquith, retired in November after 36 years' service and no new appointment had been made up to the end of the year. The average collection period has been 9 — 10 days and generally speaking the collections have been satisfactory and only isolated complaints have been received. The extensive building which has taken place during the past few years has meant that the service has been more difficult to maintain and more labour will be necessary in the near future if it is to be kept up to satisfactory standard.

Whilst it has been possible to maintain a full staff and no labour problems have been felt, it has been necessary for additional labour to be employed at times of heavy sickness and holidays.

All choked drains have been cleansed by the department and the urinals regularly cleansed and maintained.

3 S. & D. fore and aft tipper vehicles are employed on the collection of refuse and the vehicles give satisfactory service with low maintenance costs. The last petrol vehicle was disposed of and replaced by a diesel engined one early in the year and now all the Council's vehicles are on diesel oil.

Tipping is carried on at Lee Moor, Ferry Lane, and Jerry Clay Lane, and during the year tip fires were again the source of nuisance and lack of suitable covering

material aggravated the position. When material was available the fires were sealed off and nuisance reduced to a minimum.

Private individuals again made extensive use of the tips at Ferry Lane and Jerry Clay Lane and in doing so, were the cause of complaints respecting refuse being dumped adjoining the highway and blowing into hedges, roads, and ditches.

The Jerry Clay Lane tip is almost finished and it will be necessary in the near future for an alternative site to be found or all the refuse from the Wrenthorpe area to be brought to the Ferry Lane tip.

The work of salvaging waste materials has continued and the collection, baling, and sale of waste paper has resulted in a total of £752 during the year. The paper has been sorted into two different grades before despatch with a price of £7 15s. 0d. for mixed paper and £8 5s. 0d. for newsprint. Delivery of waste paper has again been limited by the Thames Board Mills, this has meant a loss of bonus by the men and a loss of interest by them. Since the very bad weather in November no waste paper has been collected as conditions would not allow it.

As a result of the waste paper bonus scheme the men were paid £149 for the 93 tons collected.

Now in its eleventh year, the scheme for the provision of dustbins at a charge on the rates has continued satisfactorily. During the year under review 245 have been renewed. As a result of the scheme there are now no bad bins, with consequent improvement in the storage and collection of household refuse.

PETROLEUM SPIRIT STORES

22 licences for the storage of petroleum spirit are in force in the district; the quantity of spirit stored ranging from 25 to 12,500 gallons. Regular visits have been made to all these premises to ensure that the regulations and safety precautions are complied with.

HAIRDRESSERS

There are 14 hairdressers registered under the West Riding (General Powers) Act, 1951, Section 120, we have

no bye-laws in force in the area. The premises are kept in satisfactory condition.

MISCELLANEOUS TABLE

Letters sent out	...	GENERAL	2,986
Informal notices	...	HOUSING	312

I remain, Gentlemen,

Your obedient Servant,

D. WALKER.

